

APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Type::	REGULAR
Subject Matter::	UTILITY
CD-ROM or CD-R?::	NONE
Title::	DRY TONER, AND PROCESS CARTRIDGE, IMAGE FORMING PROCESS AND APPARATUS USING THE SAME
Attorney Docket Number::	245450US2
Total Drawing Sheets::	6

INVENTOR INFORMATION

Applicant Authority Type::	INVENTOR
Status::	FULL CAPACITY
Given Name::	Masami
Family Name::	TOMITA
City of Residence::	Numazu-shi
Country of Residence::	Japan
Street of Mailing Address::	Pasco Grand Mansion Shin-Numazu 302, 19-1, Shinjuku-cho,
City of Mailing Address::	Numazu-shi
State or Province of Mailing Address::	Shizuoka
Country of Mailing Address::	Japan
Applicant Authority Type::	INVENTOR
Status::	FULL CAPACITY
Given Name::	Fumihito
Family Name::	SASAKI
City of Residence::	Fuji-shi
Country of Residence::	Japan
Street of Mailing Address::	2657-73, Imaizumi,
City of Mailing Address::	Fuji-shi
State or Province of Mailing Address::	Shizuoka
Country of Mailing Address::	Japan

Applicant Authority Type::	INVENTOR
Status::	FULL CAPACITY
Given Name::	Toshiki
Family Name::	NANYA
City of Residence::	Mishima-shi
Country of Residence::	Japan
Street of Mailing Address::	40-1, Fujimidai,
City of Mailing Address::	Mishima-shi
State or Province of Mailing Address::	Shizuoka
Country of Mailing Address::	Japan
Applicant Authority Type::	INVENTOR
Status::	FULL CAPACITY
Given Name::	Hiroto
Family Name::	HIGUCHI
City of Residence::	Numazu-shi
Country of Residence::	Japan
Street of Mailing Address::	Semui Heights 101, 387-1, Ozuwa,
City of Mailing Address::	Numazu-shi
State or Province of Mailing Address::	Shizuoka
Country of Mailing Address::	Japan
Applicant Authority Type::	INVENTOR
Status::	FULL CAPACITY
Given Name::	Shinichiro
Family Name::	YAGI
City of Residence::	Numazu-shi
Country of Residence::	Japan
Street of Mailing Address::	726-2, Shimokanukiyanagihara,
City of Mailing Address::	Numazu-shi
State or Province of Mailing Address::	Shizuoka
Country of Mailing Address::	Japan

Applicant Authority Type::	INVENTOR
Status::	FULL CAPACITY
Given Name::	Shigeru
Family Name::	EMOTO
City of Residence::	Numazu-shi
Country of Residence::	Japan
Street of Mailing Address::	1259-1, Higashishiji,
City of Mailing Address::	Numazu-shi
State or Province of Mailing Address::	Shizuoka
Country of Mailing Address::	Japan
Applicant Authority Type::	INVENTOR
Status::	FULL CAPACITY
Given Name::	Tomoyuki
Family Name::	ICHIKAWA
City of Residence::	Numazu-shi
Country of Residence::	Japan
Street of Mailing Address::	Corpo Sugimoto 101, 19-14, Takazawa-
	cho,
City of Mailing Address::	Numazu-shi
State or Province of Mailing Address::	Shizuoka
Country of Mailing Address::	Japan
Applicant Authority Type::	INVENTOR
Status::	FULL CAPACITY
Given Name::	Naohito
Family Name::	SHIMOTA
City of Residence::	Sunto-gun
Country of Residence::	Japan
Street of Mailing Address::	Bell Shine Takehara A-103, 344-6,
	Takehara, Nagaizumi-cho,
City of Mailing Address::	Sunto-gun
State or Province of Mailing Address::	Shizuoka
Country of Mailing Address::	Japan

Applicant Authority Type:: INVENTOR
 Status:: FULL CAPACITY
 Given Name:: Maiko
 Family Name:: KONDO
 City of Residence:: Numazu-shi
 Country of Residence:: Japan
 Street of Mailing Address:: City Corpo Hondamachi 302, 1-36,
 Honda-machi,
 City of Mailing Address:: Numazu-shi
 State or Province of Mailing Address:: Shizuoka
 Country of Mailing Address:: Japan

Applicant Authority Type:: INVENTOR
 Status:: FULL CAPACITY
 Given Name:: Tadao
 Family Name:: TAKIKAWA
 City of Residence:: Shinjo-shi
 Country of Residence:: Japan
 Street of Mailing Address:: 13, Fujinami, Aza, Kawaji,
 City of Mailing Address:: Shinjo-shi
 State or Province of Mailing Address:: Aichi
 Country of Mailing Address:: Japan

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

FOREIGN PRIORITY INFORMATION

Application Number:	Country::	Filing Date::	Priority Claimed::
2002-335449	Japan	11/19/02	YES
2003-100049	Japan	04/03/03	YES
2003-287584	Japan	08/06/03	YES